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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF MISSISSIPPI

FILED

FEB 27 2015

DAVID CREAS, CLERK
BY [Signature] Deputy

Vadell C. JOHNSON
Plaintiff

CASE NO. 4:15CV23-DMB-DAS

V.
SHERIFF, MR. KELVIN WILLIAMS, ET. AL
BOLIVAR COUNTY SHERIFF'S DEPT.
2792 HWY. 9 WEST CLEVELAND, MS. 38732
Defendant

PRISONER'S COMPLAINT CHALLENGING CONDITIONS OF CONFINEMENT

1. THE PLAINTIFF'S full legal name, the name under which the Plaintiff was sentenced, the Plaintiff's inmate identification number, the Plaintiff's mailing address, and the Plaintiff's place of confinement are as follows:

A. Legal name: Vadell C. JOHNSON
B. Name under which sentenced: Vadell C. JOHNSON
C. Inmate identification number: 2013030036
D. Plaintiff's mailing address (street or post office box number, city, state, zip): 2792 Highway 9 West
CLEVELAND, MS 38732
E. Place of confinement: Bolivar County Correctional Facility

2. Plaintiff names the following person(s) as the Defendant(s) in the civil action:

Name: KELVIN WILLIAMS
Title (Superintendent, Sheriff, etc.): Sheriff
Defendant's mailing address (street or post office box number, city, state, zip): 2792 Highway 9 West
CLEVELAND, MS 38732

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Name:

Dra Starks

Title (Superintendent, Sheriff, etc.):

Warden

Defendant's mailing address (street or post office, box number, city, state, ZIP)

2792 Highway 6 WEST

CLEVELAND, MS 38732

Name:

Gloria Westley

Title (Superintendent, Sheriff, etc.):

Chief of Security

Defendant's mailing address (street or post office, box number, city, state, ZIP)

2792 Highway 6 WEST

CLEVELAND, MS 38732

Name:

JOEL NORWELL

Title (Superintendent, Sheriff, etc.):

LT. (LIEUTENANT)

Defendant's mailing address (street or post office, box number, city, state, ZIP)

2792 Highway 6 WEST

CLEVELAND, MS 38732

(If additional Defendants are named, provide on separate sheets of paper the complete name, title, and address information for each. Clearly label each additional sheet as being a continuation of Question 2).

3. Have you commenced other lawsuits in any other court, State or Federal, dealing with or pertaining to the same facts that you allege in this lawsuit or otherwise relating to your imprisonment?

☐ YES☒ NO

4. If you checked "YES" in Question 3, describe each lawsuit in the space below. If there is more than one lawsuit, describe the additional lawsuit(s) on separate sheets of paper; clearly label each additional sheet as being a continuation of Question 4.

A. Parties to the lawsuit:

Plaintiff(s):

Defendant(s):

B. Court:

D. Judge's Name:

F. Date decided:

C. Docket NO:

E. Date suit filed:

G. Result (affirmed, reversed, etc.):

5. Is there a PRISONER GRIEVANCE PROCEDURE in system in the place of your confinement?

☒ YES☐ NO

6. If "YES," did you present to the GRIEVANCE SYSTEM the same facts and issues you allege in this Complaint? (See Question 9, below).

☒ YES☐ NO

7. If you checked "YES" in Question 6, answer the following questions:

CONTINUATION OF QUESTION 2

NAME: James Caemichael

Title (superintendent, sheriff, etc.): LT (LIEUTENANT)

Defendant's mailing address (street or 2792 Highway 8 WEST
Post office, box number, city, state, ZIP) CLEVELAND, MS 38732

NAME: MS. TATE

Title (superintendent, sheriff, etc.): C/O (correctional officer)

Defendant's mailing address (street or 2792 Highway 8 WEST
Post office, box number, city, state, ZIP) CLEVELAND, MS 38732

NAME: MR. HOGAN - (2 shift)

Title (superintendent, sheriff, etc.): C/O (correctional officer)

Defendant's mailing address (street or 2792 Highway 8 WEST
Post office, box number, city, state, ZIP) CLEVELAND, MS 38732

NAME: MR. SIMPSON

Title (superintendent, sheriff, etc.): C/O (correctional officer)

Defendant's mailing address (street or 2792 Highway 8 WEST
Post office, box number, city, state, ZIP) CLEVELAND, MS 38732

NAME: MS. Golliday

Title (superintendent, sheriff, etc.): NURSE

Defendant's mailing address (street or 2792 Highway 8 WEST
Post office, box number, city, state, ZIP) CLEVELAND, MS 38732

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A. DOES the GRIEVANCE SYSTEM Place a limit on the TIME within which a GRIEVANCE must be Presented?

☒ YES☐ NO

B. If you answered "YES", did you file or present your GRIEVANCE within the time limit allowed?

☒ YES☐ NO

C. The Court must find that you exhausted the Prison's grievance system and administrative remedies before it can consider this Complaint. State EVERYTHING you did to present your Grievance(s). Be specific. Include the date(s) on which you filed or presented your Grievances to Prison Officers; identify the officer(s). State your claim(s) exactly.

ON JANUARY 14, 2015 I FILED INMATE REQUEST - Informal Grievances form to Brandie L. Hudson THE GRIEVANCE OFFICER... SEE ATTACHMENT EXHIBIT - "A"

D. State specifically what official response your Grievance received. If the Prison provides an administrative review of the decision on your Grievance, state whether you applied for that review and what the result was.

ON JANUARY 29, 2015 THE GRIEVANCE OFFICER BRANDIE L. HUDSON finally came and pick up the Grievance forms 15 days later. She told me I should hear a response within 7 days. ON February 4, 2015 BRANDIE L. HUDSON advised me that she gave the Grievance to Chief of Security Gloria Westley on my way to the ORTHOPEDIC CLINIC IN CLARKDALE, MS for a follow up on my hand. She also stated that Chief Westley had 7 days to respond and give it back to her. NOW ITS February 14, 2015 16 (SIXTEEN) days later SINCE my Grievance was officially filed. I now seek recourse in the honorable COURT.

QUESTION 7 - EXHIBIT - A

EMERGENCY APPEAL !!!Dated Jan 14th 2015

BOLIVAR COUNTY REGIONAL CORRECTIONAL FACILITY

INMATE GRIEVANCE FORMINMATE'S NAME Vedell Johnson

Booking Num#

~~WDC#~~ 2013030034 DORM C-3

State the nature of your grievance. Explain fully. Give details including dates, times and persons involved. Use an additional sheet of paper if necessary.

I Vedell Johnson broke my hand on Jan 9th 2015 at approximately 5:30 or 6:00 p.m. I asked Officer Mr. Hogan, Mrs. Tate, Mr. Simpson and LT. Carmichael to help me and they refuse me medical attention... They waited to the shift changed and told LT. White to assist me. LT. White called Nurse Goilday and she told her I had to wait till the next day which was Jan 10th 2015 and they still refuse me medical attention... I showed LT. Norvell that my hand was broke and he told me that there's nothing he can do. So I had my family call up here to see what's the problem and they told them a S.O was in route to take me and still didn't get any medical attention on FIRST STEP Jan 10th 2015. It wasn't till Jan 11th when I got some medical attention... I went to Flu ER and they told me I need to see a bone specialist which was three days later on Jan 14th. Please help me with this matter... I need to know why these officers refuse me medical attention.

GRIEVANCE OFFICER RESPONSE

She said SEVEN days to respond to this Grievance...
She pick it up on Jan. 29, 2015 at about 10:55 am.

INMATE IS SATISFIED WITH RESPONSE: () YES () NO
NOT SATISFIED, PROCEED TO STEP 2: () YES () NO

SECOND STEP

GRIEVANCE OFFICER'S RESPONSE

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SPECIAL NOTE: Attach to this complaint as exhibits complete copies of all requests you made for administrative relief through the grievance system, all responses to your requests or grievances, all administrative appeals you made, all responses to your appeals, and receipts for documents that you have.

8. If you checked "NO" in Question 6, explain why you did not use the GRIEVANCE PROCEDURE of system:

9. Write below, as briefly as possible, the facts of your case. Describe how each Defendant is involved. Write the names of all other persons involved. Include dates and precise places of events. Do not give any legal argument or cite any legal authority. If you have more than one claim to present, number each claim in separate paragraph. Attach additional pages only if necessary; label attached pages as being continuation(s) of Question 9.

On 1-9-2015 Approx. 5:30-6:00pm I Vadell Johnson was involved in a physical altercation on the zone (C-3) here at Bolivar County Jail. A Code Blue was called over the microphone. It was witness by 40 Ms. Tate and 40 Mr. Hogan. Immediately afterwards my hand started hurting and swelling severely. I showed my hand to 40 Mr. Hogan, Ms. Tate, Mr. Simpson and LT. Carmichael immediately. My knuckle was clearly pushed back to my wrist. My hand had turned bluish purple. They all told me it's nothing they can do. They told me the nurse wasn't here and they couldn't take me to the ER. I asked them to call Sheriff Williams or someone that can approve my going to the ER and they refused. I waited till the shift changed at 11:00pm that same night and I asked the new shift supervisor which was LT. White to help me. I showed her my hand by then my whole hand was swollen, I couldn't make a fist. LT. White immediately call Nurse Golliday and she told LT. White I had to wait till the next day because there's not a Bone Specialist at the ER. I told

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L.T. White to tell her that i still needed attention regarding ~~leg~~3. She call the nurse back and Nurse Golliday stated that i still had to wait till the next day. I then asked L.T. White was there anyone else that she can call to get me some medical attention and she stated that was all she can do. (SEE ATTACHMENT)

10. state briefly exactly what you want the court to do for you. Do not make legal arguments. Do not cite legal authority.

I would like for the Court to Order each defendant to pay the sum of \$250,000.00 in their individual capacity, and the sum of \$1,000,000.00 in punitive damage, for my pain and suffering, and denying me medical attention.

This Complaint was executed at (location): Bolivar County Regional Correctional Facility

and I declare or certify or verify or state under penalty of perjury that this Complaint is true and correct.

DATE: FEB 14, 2015

Vadell C. Johnson
Plaintiff's Signature

(CONTINUATION OF PAGE "5")

Early the next day 1-10-2015 right when the next shift changed I spoke with Officer Butler, C/O MR. ATKINS, C/O MR. MONTGOMERY, C/O MS. SHEGOG about getting me some medical attention for my hand. I showed them my hand and C/O Mr. Butler called nurse Golliday again and she refused me medical attention again by saying there's nothing she can do. I asked for the shift supervisor which was LT. NORVELL. I showed him my hand by then my hand was hurting so badly that I couldn't stand to touch it. I asked him to please assist me on getting to the ER. I told him nurse Golliday told LT. White I had to wait till today - last night to go to the ER. Then he stated there's nothing can be done and he'll get back with me. I then call my family. My FIANCE' BETHINA JACKSON, SISTER Shedraque Williams, Child's mother Kia Howard and also Euphie EVANS to advise them about what's going on. My sister Shedraque Williams spoke with Officer Amie Williams and she advised her my sister shedraque that a S.O was in route to take me to the ER. My Fiance' Bethina Jackson called Preston Billings Supervisor of District 3 for help in this matter and he advised her to call back to the Jail and ask them to see what's going on and to call him back. BETHINA JACKSON called the Jail and they refused to tell her anything about a inmate. BETHINA JACKSON then called Preston Billings back and didn't get a answer but left a voicemail. I was NEVER taken NOR got any medical attention that day NOR was giving anything to alleviate the pain. ON 1-11-2015 2 (two) days later after the incident I was finally taken to the ER. I received some pain medication and a medical referral to a Bone Specialist. Three day later ON 1-14-2015 I finally received some proper medical attention, where my Bone was reset and a cast was placed on it. I know Each Defendant conspired to Deny me medical attention.

Vadell C. JOHNSON
2792 Hwy 8 WEST
CLEVELAND, MS 38732

RECEIVED

FEB 27 2015

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF MISSISSIPPI

WARNING
IT IS UNLAWFUL FOR LETTER CARRIER
OR INMATE PURCHASES
ANY CO. REG. CORRECTIONAL FACILITY
CLEVELAND, MS 38732

Pro Se Law Clerk
301 W. Con
A. DERDEEN, IV